COMBINED DECLARATION AND POWER OF ATTORNEY

As a below-named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if multiple names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled ENHANCED FRAME STRUCTURE FOR USE IN ADVANCED TELEVISION SYSTEMS COMMITTEE STANDARDS BROADCAST, the specification of which is being filed under the above-identified Attorney Docket Number.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

(Number)	(Country)	(Day/Month/Year Filed)	Yes No (Priority Claimed)
		_	YesNo
(Number)	(Country)	(Day/Month/Year Filed)	(Priority Claimed)

I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

PROVISIONAL APPLICATION NUMBER

60/267,957 60/280.961 FILING DATE

2/9/01 4/2/01

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorneys and/or agents of Sarnoff Corporation and Moser, Patterson & Sheridan, LLP to prosecute this application and transact all business in the Patent and Trademark Office having a <u>Customer Number 28166</u> connected therewith:

I hereby direct that all correspondence and telephone calls in connection with this application

be addressed to:

Moser, Patterson & Sheridan, LLP 595 Shrewsbury Avenue, Suite 100 Shrewsbury, NJ 07702 Tel.(732) 530-9404 Fax.(732) 530-9808

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

both, under Section 1001 of Title 18 of the United States Code, ar jeopardize the validity of the application or any patent issued thereon.
SIGNATURES
Full name of first inventor: Henry Owen
Inventor's signature: Nouvey Orec-
Date: 2(102 Country of Litizenship: U.S.A. Residence and Post Office Address: 4 Austen Court Medford, NJ 08055
Full name of second inventor: Zygmond Turski Inventor's signature: Date: 2/u/o2 Country of Citizenship: U.S.A. Residence and Post Office Address: 133 Rosewood Drive Florence, NJ 08505
Full name of third inventor : Inventor's signature:
Date: Country of Citizenship:
Residence and Post Office Address: